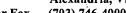
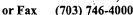
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450





indicated unless corrected		ismitting the ISSU Patent, advance or	E FEE and	Fax (703) 746-4000 PUBLICATION FEE (if requirements of maintenance fees	uired). Blocks 1 through 5 s will be mailed to the current	hould be completed where correspondence address as
maintenance fee notification		in Block 1, by (a) specifying	a new correspondence address	s; and/or (b) indicating a sepa	arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for	any change of address)	· · · · · · · · · · · · · · · · · · ·	Note: A certificate o	f mailing can only be used for	or domestic mailings of the
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900 17TH STREE	T NW	E AUG 10	in g	addressed to the Ma	with sufficient postage for finil Stop ISSUE FEE address PTO (703) 746-4000, on the control of t	above, or being facsimile
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APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/674,289	10/30/2000	Tapani V		Vuorinen	LAIN-033	6903
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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ALVO,	ALVO, MARC S			162-009000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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